

ISSUE SLIP STAPLE AREA (for additional cross references)

LOCATION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	12301
FORMALITY REVIEW	JK	835	02/02/01
RESPONSE FORMALITY REVIEW	A.M	JC 580	05-15-01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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